

Epidemiology of *Mycobacterium bovis* Disease in Humans in England, Wales, and Northern Ireland, 2002–2014

Technical Appendix

***Mycobacterium bovis* questionnaire, England, Wales, and Northern Ireland**

The questionnaire was introduced in 1993 to collect basic demographic, clinical and exposure information for *M. bovis* cases before the current Enhanced Tuberculosis Surveillance system (ETS) was implemented to collect demographic and clinical data for all TB cases in 1999.

Since this time the questionnaire has undergone slight revisions. In 2004, travel history was added to the questionnaire. In 2012, much of the demographic and clinical information was removed as this was by then available through ETS. Additionally, tickbox options were added to categorise the setting in which contact with a human case of TB occurred. In 2015, the collection of details on unpasteurised milk product consumption were expanded to include the type of product (milk, cheese, yogurt) and the animal which the product came from. Additionally, a tickbox to specify if the patient was a livestock farmer was added (previously only worked in an abattoir, as a vet, with animals in another capacity was collected) and a question to ask about contact with farm animals.

The current exposure data collected are as follows:

CASE BACKGROUND INFORMATION

Please provide details of; if the patient is immunosuppressed, or on immunosuppressive therapy:

Please provide any other relevant clinical details:

CONTACTS OF OTHER HUMAN CASES (DETAILS)

Has the patient ever spent any time in contact with any known (human) cases of tuberculosis?

Yes No Unknown If yes, ETS/LTBR ID: _____

If yes, please provide details:

Date	Exposure setting	Details
	<input type="checkbox"/> Household	
	<input type="checkbox"/> Health care	<input type="checkbox"/> Hospital <input type="checkbox"/> Other
	<input type="checkbox"/> Education	<input type="checkbox"/> Nursery <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Tertiary
	<input type="checkbox"/> Detention	<input type="checkbox"/> Prison <input type="checkbox"/> Immigration
	<input type="checkbox"/> Homeless Hostel	<input type="checkbox"/> Residential Hostel <input type="checkbox"/> Night shelter <input type="checkbox"/> Other
	<input type="checkbox"/> Other congregate settings	<input type="checkbox"/> Elderly residential <input type="checkbox"/> Nursing home <input type="checkbox"/> Pub <input type="checkbox"/> Workplace <input type="checkbox"/> Other
	<input type="checkbox"/> Travel	<input type="checkbox"/> Air <input type="checkbox"/> Bus <input type="checkbox"/> Train <input type="checkbox"/> Ship

UNPASTEURISED MILK PRODUCT CONSUMPTION

Has the patient ever consumed unpasteurised milk products? Yes No Unknown

If yes, please provide details: Milk Cheese Yogurt

Which animal(s) was milk product obtained from: _____

With what frequency? Once Occasionally Often/regularly Most recent year of consumption: _____

Where did the patient obtain the unpasteurised milk products? UK Outside of UK

If in the UK: Own farm Local farm Other And please specify the county: _____

If outside UK, please specify the country: _____

Other details _____

TRAVEL HISTORY

Has the patient travelled or lived outside the UK for more than one month? Yes No Unknown
 (to a country with high TB prevalence where human-to-human *M.bovis* transmission may occur i.e. the Indian Subcontinent or Sub-Saharan Africa)

If yes, please provide details:

Country	Year of last visit

OCCUPATIONAL DETAILS / ANIMAL CONTACT

Has the patient ever worked: *(include voluntary work, e.g. for animal welfare charities)* - tick all relevant

in an abattoir as, or with a vet as, or with a livestock farmer with animals in another capacity

Has the patient ever: - tick all relevant

Had physical contact with wild animals: Yes No Unknown

Had physical contact with farm animals: Yes No Unknown

Had other relevant contact (excluding pets) with an animal: Yes No Unknown

FURTHER DETAILS OF OCCUPATIONAL / ANIMAL EXPOSURE

If YES to any of the above please provide details:

Animal	Year of most recent contact	Duration (years)	Country (or if in UK county)	Details

CONTACT WITH ANIMALS WITH TB

Has the patient ever: had a pet Did the pet have: suspected TB confirmed TB

Has the patient had any contact with farm animals/wild animals with a positive TB test?

Yes No Unknown If yes (or pet had TB), please provide details:

Animal	Year of most recent contact	Duration (years)	Country (or if in UK county)	Details

If the patient has had contact with TB positive farm animals,

Were visible lesions present in carcass? Yes No Unknown

Were udder lesions present? Yes No Unknown

Herd type: _____ Herd size: _____

Please provide any **other information** you think may be relevant to this illness:
